PTO/88/06 (08-03) Approved for use through 7/31/2006. OMB 0651-0832 U.S. Pelent and Tredemark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR (Column 1) SMALL ENTITY (Column 2) **FOR** NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.10(a)) \$____ OR 1... TOTAL CLAIMS (37 CFR 1.10(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.10(b)) nilnus 3 r OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR | 16(d)) OR " If the difference in column 1 is less than zero, enter "0" in column 2 JATOT OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) SMALL ENTITY (Column 3) SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT NUMBER HVIE ADDI-RATE ADDI AMENDMENT AFTER EXTRA PREVIOUSLY TIONAL TIONAL **AMENDMENT** PAID FOR FEE FEE Total Minus x , 50. DICERTICAL OR Independent Minus (3) CIRIIGOD OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (3) CFR 1 16(d)) QR TOTAL IATOT ADD'L FEE OR. J37 J'OOA (Column 1) (Column 2)

AVAILABLE

| AMENOMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI TIONAL FEE |
|-------------|---|---|----------|---|------------------|----------------------|------------------------|---------|------------------|-----------------------|
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| | THEST PRESENTATION OF WULTIPLE DEPENDENT CLAIM (D) CFR 1 16(0)) | | | | | + 5 : | | CH- | 1 5 = | |
| | | | | | | TOTAL ADD'L FEE | | Çir | TOTAL | |
| | | (Column 1) | | (Column 2) | (Cotumn 1) | | | | · | • |
| AMENDMENT C | | CLAIMS REMAINING ACTER AMENDMENT | | HIGHEST RIGHEST PREVIOUSES PAID LOIG | URESCHI ENIMA | TAST | ADDI LIQRAL FEE | | ह्यात | ADDI TIONAL FEE |
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| | Independent (37 (+5 + igu)) | | fdings | ••• | · | x \$= | | Cits | 1. \$: | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM. (37 CFR 1 16(d)) | | | | | + \$ = | | OE . | + 3 : | |
| | | | | | | 10TAL ADD L F E C | | (*) ē. | 101AL 400 CTT | |

[&]quot; If the entry in column 1 is less than the entry in column 2, while "0" in column 3.

ites comment on of information is the first by 3° Cff. I to The information is required to obtain a benefit by the postale which is to life fand by the USPIO to process) an application is confidentially is positively by 35 U.S.C. 127 and 37 CFR 1.14. This collection is estimated to take 17 minutes to complete including gathering, preparing, and schmilling the completed application living to the USPID. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and or suggestions for reducing this burden, should be sent to the Cheek reformation Officer, U.S. Patent and Trademan Office, U.S. Department of Commerce, P.O. Bex 1450, Alexandra, VA 22313-1450, DO NOT SEND FLES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Palents, P.O. Box 1450, Alexandria, VA 22313-1450

[&]quot;If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter '20'

[&]quot; If the "Highest Number Presidually Paid For" IN THIS SPACE is less than 3 lenter "3"

The Hiphest Number Presmony Paid For (I had or Independent) is the highest number found in the appropriate has in column to